

CONSUMER SERVICES DEPARTMENT

PASSENGER TRANSPORTATION REGULATORY DIVISION OFFICE OF AMBULANCE REGULATION COORDINATION

PRIVATE GROUND AMBULANCE UNIFORM RATE SCHEDULE

(Effective June 30, 2006)

	BASIC LIFE SUPPORT	ADVANCED LIFE SUPPORT	BASIC LIFE SUPPORT - EMERGENCY	
Base Rate (per trip**)	\$256.00	\$380.00	\$330.00	
Mileage (per transport mile or fraction thereof)	\$7.50	\$7.50	\$7.50	
Oxygen (per tank or fraction thereof including administration and supplies)	\$30.00	\$30.00	\$30.00	
Waiting Time (per half-hour)	\$80.00	\$120.00	\$80.00	
Special Handling	\$30.00	\$60.00	\$30.00	
Disposable Items	At cost	At cost	At cost	
* Rural – Homestead Hospital Indigent & Medicaid Patient Transports (prevailing Federal Medicaid flat rate)	\$136.00	\$190.00	N/A	

* Authorized 7/24/01 for inter-facility indigent and Medicaid transports to and from Homestead Hospital.

** In accordance with Section 4-8(k) of the County Code: "The transportation of more than one patient in one ambulance vehicle shall be prohibited, except that this Section shall not apply to transportation pursuant to a contract between a certificate holder and Miami-Dade County or to transportation pursuant to direction by the fire chief having territorial jurisdiction."

NOTE: Section 4-7 of the County Code provides that it is unlawful for any certificate holder to charge, demand, request, or accept any fare other than the rates established by the Board of County Commissioners except as may be provided by Federal law.

Section 4-7 of the County Code also provides that every ambulance shall have posted in a conspicuous place, readily visible to the occupants, a schedule showing all authorized rates.



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PRIVATE AIR AMBULANCE RATE SCHEDULE

(Effective 12/01)

Private Hospital Based Intra-County Air Ambulance Company	Rate		
Biscayne AeroMed /Baptist Hospital *	\$3,500.00		
Base Rate			
Mileage, per loaded mile	\$32.00		
Oxygen (per tank or fraction thereof including administration and supplies)	\$50.00		
Variety Childrens Hospital d/b/a Miami Childrens Hospital * Base Rate, including all services and supplies	\$3,500.00		
Mileage, per loaded mile	\$30.00		

*

In accordance with the County Code, before making an intra-county transfer, AeroMed/Baptist Hospital and Childrens Hospital must: 1) obtain certification from treating physician indicating ground transport would likely result in deterioration of patient's condition, and 2) verify that Miami-Dade Air Rescue is unavailable or declines to transport patient.

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FIRE RESCUE DEPARTMENTS – MIAMI-DADE COUNTY RATE SCHEDULE

	NA I	LE SCHED	ULE			
Fire Rescue Department	Other Costs	Base Rates BLS	Base Rates ALS	ALS 1	ALS2	SCT**
City of Miami Fire Rescue (approved		\$330	N/A	\$390	\$550	\$650
by BCC 7/22/2003)		\$330	IN/A	φ390	\$330	\$030
Oxygen per tank or fraction	\$30					
Mileage, per mile or fraction	\$ 7.50					
IV Solution	\$30					
Cardiac Monitoring	\$30					
Cervical Collar	\$30					
Special Handling*	\$30					
*Extrication, Anti-shock trousers, etc	\$30					
	-	\$330	N/A	\$380.00	¢400.00	N/A
City of Miami Beach Fire Rescue	¢20	\$330	N/A	\$380.00	\$490.00	N/A
(approved by BCC 10/7/03)	\$30					
Oxygen per tank or fraction	\$ 7.50					
Mileage, per mile or fraction	\$25					
IV Solution	\$25					
Cardiac Monitoring	\$25					
Intubation	\$25					
Backboard		41.70	** ***			
City of Coral Gables Fire Rescue		\$150	\$250			
Oxygen per tank or fraction	\$22					
Mileage, per mile or fraction	\$6.50					
City of Hialeah Fire Rescue		\$175	\$290			
Oxygen per tank or fraction	\$25					
Mileage, per mile or fraction	\$ 7.50					
IV Solution	\$25					
Cardiac Monitoring	\$25					
Cervical Collar	\$25					
Backboard	\$25					
Miami-Dade Fire Rescue – Ground		\$330	N/A	\$380	\$490	\$600
(approved by BCC 7/22/03)						
Oxygen per tank or fraction	\$30					
Mileage, per mile or fraction	\$ 7.50					
IV Solution	\$25					
Cardiac Monitoring	\$25					
Cervical Collar	\$25					
Backboard	\$25					
Miami-Dade Fire Rescue – Air		Not	Not charging			
		charging				
Village of Key Biscayne Fire Rescue		\$150	\$250			
Oxygen	\$22	7-20	+-0 0			
Mileage, per mile or fraction	\$6.50					
wintedge, per fine of fraction	45.55	L	l		1	

^{**} Specialty Care Transport

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